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**** CONTINUING DATA *******
 This application is a CON of 09/769,585 01/25/2001 PAT 6,583,117
 which is a DIV of 08/875,228 10/17/1997 PAT 6,211,335
 which is a 371 of PCT/AU96/00024 01/19/1996

**** FOREIGN APPLICATIONS *******
 AUSTRALIA PN 0667 01/20/1995

IF REQUIRED, FOREIGN FILING LICENSE GRANTED SMALL ENTITY ****
 ** 09/11/2003

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	STATE OR COUNTRY AUSTRALIA	SHEETS DRAWING 12	TOTAL CLAIMS 17	INDEPENDENT CLAIMS 6
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ADDRESS
00270

TITLE
Method of tissue repair

FILING FEE RECEIVED 579	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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